

**BAKER BOTTS LLP**Please type a plus sign (+) inside this box → **+**

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/058,575
Filing Date	January 28, 2002
First Named Inventor	Shane Y. Hong
Group Art Unit	1731
Examiner Name	Carlos N. Lopez
Attorney Docket Number	AP33951 (070050.1463)

**ENCLOSURES (check all that apply)**

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers<br>(for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication<br>to Group<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below):<br><br>Return Receipt Postcard |
|---|---|--|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
Signature	 Att Name: Jeffrey D. Sullivan PTO Reg: 43,170
Date	April 19, 2004

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date: April 19, 2004

Typed or printed name	Jeffrey D. Sullivan
Signature	
Date	April 19, 2004

Title: METHOD AND SYSTEM FOR CONTROLLED SURFACE SCRATCH REMOVAL AND GLASS  
RESURFACING

Use Space Below for Additional Information: